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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/788,299	02/16/2001	Marty Williams	Remora III

23217
GLENN L WEBB
P.O. BOX 951
CONIFER, CO 80433

CONFIRMATION NO. 1502

FORMALITIES LETTER



OC000000006558469

Date Mailed: 09/14/2001

NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

Filing Date Granted

The U.S. Patent and Trademark Office has received your reply on to the Notice mailed and it has been entered into the nonprovisional application. The reply, however, doesnot include the following items required in the Notice.

The period of reply remains as set forth in the Notice. You may,however, obtain EXTENSIONS OF TIME under the provisions of 37 CFR 1.136 (a)accompanied by the appropriate fee (37 CFR 1.17(a)).

A complete reply must be timely filed to prevent ABANDONMENT of the above-identified application.

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - the application includes photographs of the invention subject matter that appear capable of illustration and which are illegible after scanning (see 37 CFR 1.84(b));

*A copy of this notice **MUST** be returned with the reply.*


Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of: Williams et al.

S.N.: 09/788,299

A.U. Unit 3612

Filed: 02/16/01

Examiner: Patel

For: EQUIPMENT TRANSPORTATION
SYSTEM

BOX FEE
COMMISSIONER OF PATENTS AND TRADEMARKS
WASHINGTON, D.C. 20231

Response to Notice of Incomplete Reply

Dear Sir:

Substitute Drawings are hereby submitted in response to the Notice of Incomplete Reply mailed out on 9/14/2001. No new matter has been added.

Respectfully submitted,

Date: 11/9/01

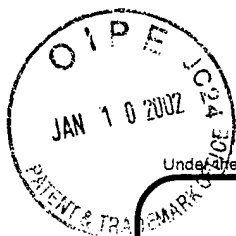
By: Glenn L. Webb
Glenn L. Webb, Reg. #32,668
P.O. Box 951
Conifer, CO 80433
(303) 838-8610

I hereby certify that this correspondence is being transmitted first class mail to the
Commissioner of Patents, Washington DC 20231

on: 11/9/01

By: Glenn L. Webb

Signature: Glenn L. Webb



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/788,299
Filing Date	02/16/2001
First Named Inventor	Williams
Group Art Unit	3612
Examiner Name	Patel
Attorney Docket Number	Remora

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Glenn L. Webb
Signature	
Date	11/19/01

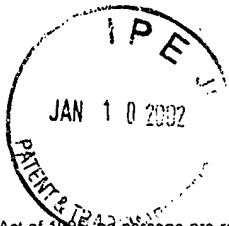
CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 11/19/01

Typed or printed name	Glenn L. Webb
Signature	
Date	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/17 (10-01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 200

Complete if Known

Application Number	09/788,299
Filing Date	02/16/2001
First Named Inventor	Williams
Examiner Name	Patel
Group Art Unit	3612
Attorney Docket No.	Remora III

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number
Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☐ Check ☒ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid	
101	740	201	370	Utility filing fee	<input type="text"/>
106	330	206	165	Design filing fee	<input type="text"/>
107	510	207	255	Plant filing fee	<input type="text"/>
108	740	208	370	Reissue filing fee	<input type="text"/>
114	160	214	80	Provisional filing fee	<input type="text"/>

SUBTOTAL (1) (\$)**2. EXTRA CLAIM FEES**

Total Claims - 20** = X =
Independent Claims - 3** = X =
Multiple Dependent =

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid	
103	18	203	9	Claims in excess of 20	<input type="text"/>
102	84	202	42	Independent claims in excess of 3	<input type="text"/>
104	280	204	140	Multiple dependent claim, if not paid	<input type="text"/>
109	84	209	42	** Reissue independent claims over original patent	<input type="text"/>
110	18	210	9	** Reissue claims in excess of 20 and over original patent	<input type="text"/>

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
105	130	205	65	Surcharge - late filing fee or oath	<input type="text"/>
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139	130	139	130	Non-English specification	<input type="text"/>
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	<input type="text"/>
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115	110	215	55	Extension for reply within first month	<input type="text"/>
116	400	216	200	Extension for reply within second month	200
117	920	217	460	Extension for reply within third month	<input type="text"/>
118	1,440	218	720	Extension for reply within fourth month	<input type="text"/>
128	1,960	228	980	Extension for reply within fifth month	<input type="text"/>
119	320	219	160	Notice of Appeal	<input type="text"/>
120	320	220	160	Filing a brief in support of an appeal	<input type="text"/>
121	280	221	140	Request for oral hearing	<input type="text"/>
138	1,510	138	1,510	Petition to institute a public use proceeding	<input type="text"/>
140	110	240	55	Petition to revive - unavoidable	<input type="text"/>
141	1,280	241	640	Petition to revive - unintentional	<input type="text"/>
142	1,280	242	640	Utility issue fee (or reissue)	<input type="text"/>
143	460	243	230	Design issue fee	<input type="text"/>
144	620	244	310	Plant issue fee	<input type="text"/>
122	130	122	130	Petitions to the Commissioner	<input type="text"/>
123	50	123	50	Processing fee under 37 CFR 1.17(q)	<input type="text"/>
126	180	126	180	Submission of Information Disclosure Stmt	<input type="text"/>
581	40	581	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
179	740	279	370	Request for Continued Examination (RCE)	<input type="text"/>
169	900	169	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify) _____				<input type="text"/>	

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**SUBMITTED BY**

Name (Print/Type) Glenn L. Webb

Registration No. 32,668
(Attorney/Agent)**Complete (if applicable)**Telephone Signature Date

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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